

Substitute for form 1449/PTO

## INFORMATION DISCLOSURE STATEMENT BY APPLICANT

**(Use as many sheets as necessary)**

Sheet	1	of	1
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**Complete if Known**

Application Number	N/A
Filing Date	Herewith
First Named Inventor	SUH, Pann-Ghill
Art Unit	N/A
Examiner Name	N/A
Attorney Docket Number	20010-21USA

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Examiner  
Signature

Date Considered

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